

# 48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

<b>1. NAME OF COMMITTEE IN FULL</b> <div style="text-align: center; font-size: 1.2em;">Emmer for Congress</div>			
<b>ADDRESS</b> (number and street) PO Box 998			
<b>CITY, STATE, and ZIP CODE</b> <div style="display: flex; justify-content: space-between;"> <span>Anoka</span> <span>MN</span> <span>55303</span> </div>			
<b>2. NAME OF CANDIDATE</b> Thomas Earl Emmer Jr.	<b>3. OFFICE SOUGHT</b> (State and District) House MN 06		<b>4. FEC IDENTIFICATION NUMBER</b> C00545749
<b>5. IS THIS AN AMENDMENT?</b> <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____			

  

<b>A. FULL NAME, MAILING ADDRESS AND ZIP CODE</b> <div style="text-align: center; font-size: 1.2em;">William Spell</div> 222 S 9th St. Ste. 2880 Minneapolis MN 55402-3359	Name of Employer Information Requested  <b>Transaction ID : 6FF6595C090CC4355</b> Occupation Information Requested	Date (month, day, year) 10/18/2014	Amount 1000.00
<b>B. FULL NAME, MAILING ADDRESS AND ZIP CODE</b> <div style="text-align: center; font-size: 1.2em;">Randy Morgan</div> 5808 South Dr.  Minneapolis MN 55436-2039	Name of Employer Information Requested  <b>Transaction ID : 65B9751D880764B27</b> Occupation Information Requested	Date (month, day, year) 10/18/2014	Amount 1000.00
<b>C. FULL NAME, MAILING ADDRESS AND ZIP CODE</b> AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE 25 MASSACHUSETTS AVE, NW SUITE 600 Washington DC 20001-7400	Name of Employer Information Requested  <b>Transaction ID : 6E1A8343A0DF24A81</b> Occupation Information Requested	Date (month, day, year) 10/18/2014	Amount 2000.00
<b>D. FULL NAME, MAILING ADDRESS AND ZIP CODE</b> NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE 430 NORTH MICHIGAN AVENUE  CHICAGO IL 60611	Name of Employer Information Requested  <b>Transaction ID : 6E15BC1EF1662431E</b> Occupation Information Requested	Date (month, day, year) 10/18/2014	Amount 5000.00
<b>E. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>	Name of Employer   Occupation Information Requested	Date (month, day, year)	Amount

  

<b>SIGNATURE (optional)</b> Jennifer Niska  <div style="text-align: right;">[Electronically Filed]</div>	<b>DATE</b> 10/20/2014	<b>For further information contact:</b> Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100
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Any information copied from reports and statements filed under the Federal Election Campaign Act may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes other than using the name and address of any political committee to solicit contributions from such committee.

## FEC FORM 6

(Revised 07/2011)